


<b>Effective on 12/08/2004</b> <b>Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818)</b> <h2 style="margin: 0;">FEE TRANSMITTAL</h2> <h3 style="margin: 0;">For FY 2007</h3>		<b>Complete if Known</b>	
<input type="checkbox"/> Applicant claims small entity status See 37 CFR 1.27		Application Number	10/660,797-Conf. #6152
		Filing Date	September 12, 2003
		First Named Inventor	David GOODMAN
		Examiner Name	W. F. Briney
		Art Unit	2615
TOTAL AMOUNT OF PAYMENT		(\$)	120.00
		Attorney Docket No.	5556-0102PUS1

<b>METHOD OF PAYMENT</b> (check all that apply)	
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____	
<input checked="" type="checkbox"/> Deposit Account    Deposit Account Number: <u>02-2448</u> Deposit Account Name: <u>Birch, Stewart, Kolasch &amp; Birch, LLP</u>	
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input checked="" type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee	
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 <input checked="" type="checkbox"/> Credit any overpayments	

<b>FEE CALCULATION</b>							
<b>1. BASIC FILING, SEARCH, AND EXAMINATION FEES</b>							
Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	
							<b>Small Entity</b>
							Fee (\$)
<b>2. EXCESS CLAIM FEES</b>							
<b>Fee Description</b>							
Each claim over 20 (including Reissues)							50
Each independent claim over 3 (including Reissues)							200
Multiple dependent claims							360
							180
							<b>Multiple Dependent Claims</b>
							Fee (\$)
							Fee Paid (\$)
<b>Total Claims</b> <b>Extra Claims</b> <b>Fee (\$)</b> <b>Fee Paid (\$)</b> 17    - 20 = _____ x _____ = _____							
HP = highest number of total claims paid for. If greater than 20							
<b>Indep. Claims</b> <b>Extra Claims</b> <b>Fee (\$)</b> <b>Fee Paid (\$)</b> 1    - 3 = _____ x _____ = _____							
HP = highest number of independent claims paid for. If greater than 3							
<b>3. APPLICATION SIZE FEE</b>							
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s)							
<b>Total Sheets</b>		<b>Extra Sheets</b>	<b>Number of each additional 50 or fraction thereof</b>		<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>	
_____ - 100 = _____		/50 = _____	(round up to a whole number) x _____		= _____		
							<b>Fees Paid (\$)</b>
<b>4. OTHER FEE(S)</b>							
Non-English Specification, \$130 fee (no small entity discount)							
Other (e.g., late filing surcharge): 1251 Extension for response within first month							120.00

<b>SUBMITTED BY</b>		Registration No.	40,758	Telephone	(703) 205-8000
Signature		(Attorney/Agent)		Date	May 7, 2007
Name (Print/Type)	Russell O. Paige				